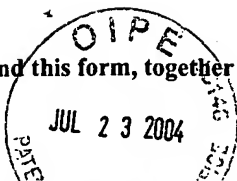


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Complete and send this form, together with applicable fee(s), to: **Mail**

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MARSHALL, GERSTEIN & BORUN LLP
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233 S. WACKER DRIVE
CHICAGO, IL 60606

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Richard H. Anderson	(Depositor's name)
<i>Richard H. Anderson</i>	(Signature)
July 20, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/007,445	11/05/2001	Thomas H. Gilman	30056/37692	3356

TITLE OF INVENTION: ABSORBENT FOAM WOUND DRESSING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEWIS, KIM M	3743	602-041000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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1 Marshall,
 2 Gerstein &
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hollister Incorporated

Libertyville, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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